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CIRCLE ONE: **TEMPORARY** **OR** **VOLUNTEER** CIRCLE ONE: **NEW** **RENEWAL**

NAME: _____ SS #: _____
(LAST) (FIRST) (M.I.)

DATE OF BIRTH : ____/____/____ **SEX:** ____ **RACE:** ____ **EYES:** ____ **HAIR:** ____ **HT:** ____ **WT:** ____

PLACE OF BIRTH: _____ Driver's Lic. #: _____
(State Only) (State) (Number)

HOME ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP CODE)

Name of your Department/Agency: _____ Phone # _____

ADDRESS: _____

(STREET) (CITY) (STATE) (ZIP CODE)

PURPOSE OF VISITATION TO INSTITUTIONS: _____

Have you ever been convicted of any violation of the Criminal Code in this State or in any other Jurisdiction? (Violations include offenses, crimes, misdemeanors, and felonies).

(Circle one) YES NO If “YES”, explain on reverse side.

Do you presently have any pending criminal charges? YES _____ NO _____ If "YES", explain on reverse side.

APPLICANT MUST LIST EXPUNGED CONVICTION(S) INFORMATION, SIGN AND DATE THE “AUTHORIZATION TO RELEASE INFORMATION” FORM LOCATED IN THIS APPLICATION. FALSIFICATION OF APPLICATION MAY RESULT IN THE TERMINATION OF YOUR EMPLOYMENT.

Have you ever engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? **YES** _____ **NO** _____

If “YES”, explain: (Please note the date of incident, date of adjudication and the name and location of the prison, jail, lockup community, facility or institution where the incident occurred).

Have you ever been civilly or administratively adjudicated of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? YES _____ NO _____

If “YES”, explain: _____

AUTHORIZATION TO RELEASE INFORMATION:

I hereby authorize the release of any and all information regarding me, to the NJ Department of Corrections, at their request, in order that they may determine my suitability for employment.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

^ ***** DO NOT WRITE BELOW THIS LINE ***** ^

***** SPECIAL INVESTIGATIONS DIVISION USE ONLY *****

THE ABOVE NAMED APPLICANT'S CRIMINAL HISTORY RECORD INDICATES:

ARREST & CONVICTION

ARREST AND NO CONVICTION

NO RECORD

NAME

TITLE

DATE

